

## AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer No.: 23696  
Attorney Docket No.: 040819C11  
In Re Application of: Daniel B. McKenna et al  
Serial Number: 09/74,955  
Filed: January 31, 2001  
Examiner: Meless Ze-vcu  
Group Art Unit: 268.

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

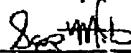
CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	36	36	0	x \$18 =	\$0
Independent**	3	3	0	x \$86 =	\$0
Multiple Dependent Claim(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			\$250	\$0
EXTENSION FEES			<input type="checkbox"/> One Month	\$110	\$
			<input type="checkbox"/> Two Months	\$420	\$
			<input checked="" type="checkbox"/> Three Months	\$950	\$950
TERMINAL DISCLAIMER			\$110	\$	
			<b>TOTAL FEE</b>	<b>\$950</b>	

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4.  Fee check in the amount of \$ \_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5.  Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$950.  
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6.  The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: August 12, 2004

Signature:   
Sandip S. Minhas, Reg. No. 44,945  
(858) 651-4903

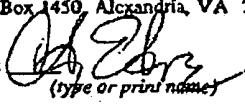
QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
10/20/2004 San Diego, California 92121-1714  
Telephone: (858) 658-5787  
01 FAX: 1232 Facsimile: (858) 658-2502

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

## MAILING

deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name:   
(type or print name)

Date: August 12, 2004

## FACSIMILE

transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Courtney Eby  
(type or print name)

Signature: \_\_\_\_\_

(TRANSAMD.VER1.13-04/30/04)